



South Dakota Board of Nursing South Dakota Department of Health 722 Main Street, Suite 3; Spearfish, SD 57783 (605) 642-1388; Fax: (605) 642-1389; www.state.sd.us/doh/nursing

Nurse Aide **Application for Faculty Changes to a Currently Approved Training Program**

Approved programs must submit, within 30 days after a change, any substantive changes made to the program during their 2-year approval period. Written approval or denial of a requested change will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

South Dakota Board of Nursing
 722 Main Street, Suite 3
 Spearfish, SD 57783

Name of Institution: Avera Education & Staffing Solutions

Address: 1000 West 4th Street, Suite 9
Yankton, SD 57078

Phone Number: 605-688-8475

Fax Number: 605-688-8483

E-mail Addresses of Primary Coordinator and/or Instructor: gmaag@avera.org

*Palisade Healthcare
 Garretson*

- ☒ **Request New Program Coordinator** must be a registered nurse with 2 years nursing experience, at least one of which is in the provision of long-term care services. The Director of Nursing (DON) may serve simultaneously as the program coordinator but may not perform training while serving as DON. (ARSD 44:04:18:10)
- ☐ Attach curriculum vita, resume, or work history

Name of Program Coordinator	State	Number	Expiration Date	Verification
<i>Gwen Maag</i>	SD	R032347	05/29/14	

- ☒ **Request New Primary Instructor** as actual teacher of course material; must be a RN or LPN with 2 years nursing experience, at least one of which is in the provision of long-term care services. (ARSD 44:04:18:11)
- ☐ Attach curriculum vita, resume, or work history,
- ☐ Attach documentation supporting previous experience in teaching adults within the past 5 years or documentation of completing a course in the instruction of adults.

Name of Primary Instructor	State	Number	Expiration Date	Verification
<i>Gwen Maag</i>	SD	R032347	05/29/14	

- ☒ **Request New Supplemental Personnel** to assist with instruction, they must have one year of experience in their respective field of practice, i.e. additional licensed nurses, social worker, physical therapist. (ARSD 44:04:18:12)
- ☐ Attach curriculum vita, resume, or work history.

Supplemental Personnel Credentials	State	Number	Expiration Date	Verification
<i>Lynne Kuper</i>	SD	R017394	10/20/13	
<i>(Palisade Healthcare Garretson SD)</i>				

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Program Coordinator Signature: *Gwen Maag* Date: *07/26/13*

This section to be completed by the South Dakota Board of Nursing

Date Application Received: <i>7/26/13</i>	Date Application Denied:
Date Approved: <i>7/26/13</i>	Reason for Denial:
Expiration Date of Approval: <i>April 2014</i>	
Board Representative: <i>SD thru</i>	
Date Notice Sent to Institution: <i>7/26/13</i>	